

Best Available Copy

CLAIMS						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/	/				51			
2	/	/	/				52			
3	2		2				53			
4	5		1				54			
5	6		1				55			
6	6		1				56			
7	6		8				57			
8	6		8				58			
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45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	/	↓	/	↓			TOTAL IND.		↓	
TOTAL DEP.	8	↔	8	↔			TOTAL DEP.		↔	
TOTAL CLAIMS	9		9				TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS